

Vonda L. Wallace  
Patent Specialist

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MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)						SERIAL NO.	FILING DATE		
						APPLICANT(S)	09/554343		
						CLAIMS			
AS FILED	AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT			*	*	*	
	IND.	DEP.	IND.	DEP.		IND.	DEP.	IND.	DEP.
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TOTAL IND.	/					TOTAL IND.			
TOTAL DEP.	/					TOTAL DEP.			
TOTAL CLAIMS	/					TOTAL CLAIMS			